

Bureau of Health Care Quality & Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>NVS4492ADA</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED  <b>10/28/2009</b>
NAME OF PROVIDER OR SUPPLIER  <b>SOLUTIONS RECOVERY INC</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>2975 TENAYA LAS VEGAS, NV 89117</b>		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
D 000	<p>Initial Comment</p> <p>Surveyor: 28276 The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state or local laws.</p> <p>This Statement of Deficiencies was generated as a result of the State Licensure survey conducted at your facility from 10/22/09 to 10/28/09. This State Licensure survey was conducted by the authority of NRS 449.150, Powers of the Health Division.</p> <p>The facility is licensed for nine residential program beds for the treatment of abuse of alcohol and drugs. The census at the time of the survey was four. Four resident files and eleven employee files were reviewed. One discharged resident file was reviewed.</p>	D 000		
D 035 SS=F	<p>NAC 449.098(3)) Preparations for disaster</p> <p>3. Each facility shall conduct a disaster drill at least annually, and a written record of each drill must be retained in the facility for not less than 12 months after the drill is conducted.</p> <p>This Regulation is not met as evidenced by: Surveyor: 28276 Based on record review and interviews on 10/22/09, the facility did not conduct an annual disaster drill for the past 2 of 2 years.</p> <p>Severity: 2 Scope: 3</p>	D 035		

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TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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D 041	Continued From page 1	D 041		
D 041 SS=C	NAC 449.102 Inventory of client's belongings  If a facility holds or stores a client's belongings, there must be an inventory of the belongings on admission, made a part of the client's record, and updated as needed. These belongings must be returned to the client upon his exit.  This Regulation is not met as evidenced by: Surveyor: 28276 Based on record review on 10/22/09, the facility failed to provide documentation of an inventory of belongings for 3 of 4 residents (Resident #2, #3 and #4).  Severity: 1 Scope: 3	D 041		
D 042 SS=C	NAC 449.105 Insurance  Liability insurance in a sufficient amount to protect clients, members of the staff, volunteers, and visitors, must be maintained. A certificate of insurance must be furnished to the health division. The certificate must include provision for 30 days notice to the division of cancellation or the nonrenewal of the policies.  This Regulation is not met as evidenced by: Surveyor: 28276 Based on record review on 10/22/09, the liability insurance certificate was expired and did not include a provision for a 30 day notice to the bureau of cancellation or the non-renewal of the policy.  Severity: 1 Scope: 3	D 042		

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D 066	Continued From page 2	D 066		
D 066 SS=B	NAC 449.111(2)(a) Administrator Duties  2. The administrator shall: (a) Organize the administrative functions of the program, delegate duties and establish a formal means of accountability on the part of subordinates.  This Regulation is not met as evidenced by: Surveyor: 21044 Based on observation on 10/22/09, the administrator failed to ensure compliance with International Fire Code when 1 of 4 emergency lights did not illuminate when tested (main hallway emergency light). Severity: 1 Scope: 2	D 066		
D 080 SS=C	NAC 449.114(6) Employees  6. The facility must provide an orientation session to new employees. Documentation of the sessions must be maintained in the employee's personnel record.  This Regulation is not met as evidenced by: Surveyor: 28276 Based on record review on 10/22/09, the facility did not provide evidence that 5 of 10 employees participated in an orientation program (Employee #1, #2, #3, #4, and #5).  Severity: 1 Scope: 3	D 080		

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D 089	Continued From page 3	D 089		
D 089 SS=C	NAC 449.114(9)(a) Employees  9. A personnel record must be maintained for each employee. The record must contain: (a) The employment application  This Regulation is not met as evidenced by: Surveyor: 28276 Based on record review on 10/22/09, the facility failed to obtain an employment application for 5 of 10 employees (Employee #1, #2, #4, #6 and #7).  Severity: 1 Scope: 3	D 089		
D 090 SS=C	NAC 449.114(9)(b) Employees  9. A personnel record must be maintained for each employee. The record must contain: (b) Letters of recommendation  This Regulation is not met as evidenced by: Surveyor: 28276 Based on record review on 10/22/09, the facility did not obtain letters of recommendation for 6 of 10 employees (Employee #1, #2, #3, #4, #5 and #11).  Severity: 1 Scope: 3	D 090		
D 091 SS=B	NAC 449.114(9)(c) Employees  9. A personnel record must be maintained for each employee. The record must contain: (c) Reference investigation records  This Regulation is not met as evidenced by: Surveyor: 28276 Based on record review on 10/22/09, the facility	D 091		

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D 091	Continued From page 4  failed to conduct a reference investigation on 5 of 11 employees (Employee #1, #2, #3, #4 and #5).  Severity: 1 Scope: 2	D 091		
D 094 SS=C	NAC 449.114(9)(f) Employees  9. A personnel record must be maintained for each employee. The record must contain: (f) Job performance evaluations;  This Regulation is not met as evidenced by: Surveyor: 28276 Based on record review on 10/22/09, the facility did not perform a job performance evaluation on 7 of 11 employees (Employee #2, #4, #6, #7, #8, #9 and #11).  Severity: 1 Scope: 3	D 094		
D 100 SS=F	NAC 449.117 Physical Examinations  All persons employed in a facility must have documentation showing that they are in compliance with any applicable provisions of chapter 441A of NAC concerning tuberculosis.  This Regulation is not met as evidenced by: Surveyor: 28276 NAC 441A.375 Medical facilities, facilities for the dependent and homes for individual residential care: Management of cases and suspected cases; surveillance and testing of employees; counseling and preventive treatment. (NRS 441A.120) 1. A case having tuberculosis or suspected case considered to have tuberculosis in a medical	D 100		

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D 100	Continued From page 5  facility or a facility for the dependent must be managed in accordance with the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (h) of subsection 1 of NAC 441A.200. 2. A medical facility, a facility for the dependent or a home for individual residential care shall maintain surveillance of employees of the facility or home for tuberculosis and tuberculosis infection. The surveillance of employees must be conducted in accordance with the recommendations of the Centers for Disease Control and Prevention for preventing the transmission of tuberculosis in facilities providing health care set forth in the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (h) of subsection 1 of NAC 441A.200. 3. Before initial employment, a person employed in a medical facility, a facility for the dependent or a home for individual residential care shall have a: (a) Physical examination or certification from a licensed physician that the person is in a state of good health, is free from active tuberculosis and any other communicable disease in a contagious stage; and (b) Tuberculosis screening test within the preceding 12 months, including persons with a history of bacillus Calmette-Guerin (BCG) vaccination. If the employee has only completed the first step of a 2-step Mantoux tuberculin skin test within the preceding 12 months, then the second step of the 2-step Mantoux tuberculin skin test or other single-step tuberculosis screening test must be administered. A single annual tuberculosis screening test must be administered thereafter, unless the medical director of the facility or his designee or another licensed physician	D 100			

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D 100	<p>Continued From page 6</p> <p>determines that the risk of exposure is appropriate for a lesser frequency of testing and documents that determination. The risk of exposure and corresponding frequency of examination must be determined by following the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (h) of subsection 1 of NAC 441A.200.</p> <p>4. An employee with a documented history of a positive tuberculosis screening test is exempt from screening with skin tests or chest radiographs unless he develops symptoms suggestive of tuberculosis.</p> <p>5. A person who demonstrates a positive tuberculosis screening test administered pursuant to subsection 3 shall submit to a chest radiograph and medical evaluation for active tuberculosis.</p> <p>6. Counseling and preventive treatment must be offered to a person with a positive tuberculosis screening test in accordance with the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (g) of subsection 1 of NAC 441A.200.</p> <p>7. A medical facility shall maintain surveillance of employees for the development of pulmonary symptoms. A person with a history of tuberculosis or a positive tuberculosis screening test shall report promptly to the infection control specialist, if any, or to the director or other person in charge of the medical facility if the medical facility has not designated an infection control specialist, when any pulmonary symptoms develop. If symptoms of tuberculosis are present, the employee shall be evaluated for tuberculosis. (Added to NAC by Bd. of Health, eff. 1-24-92; A by R084-06, 7-14-2006)</p> <p>Based on record review on 10/22/08, the facility did not ensure that 7 of 11 employees met the requirements of NAC 441A.375 concerning</p>	D 100			

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D 100	Continued From page 7  tuberculosis (TB) and 9 of 11 employees did not meet the requirements of NAC 441A concerning a pre-employment physical examination.  Findings Include:  The Employee files for Employee #1, #2, #3, #4, #5, #6, #9, #10 and #11 failed to provide documentation of a pre-employment physical.  The Employee files for Employee #1, #2, #3, #4, #6, and #10 failed to provide documentation of a two step TB test.  The Employee files for Employee #8 failed to provide documentation of an annual TB test.  Severity: 2    Scope: 3	D 100		
D 103 SS=F	NAC 449.1214 Social Model Detox Pro  1. A facility that offers a social model detoxification program: (a) Must have a physician, nurse practitioner, registered nurse or physician assistant conduct a physical assessment and a review of the general medical and drug history of a client within 24 hours after the client is admitted to the facility to ensure that a social model detoxification program is appropriate for the client. (b) Must not provide detoxification services for clients who exhibit life-threatening symptoms of withdrawal from alcohol and drug abuse. (c) Must develop and implement policies and procedures that protect the safety and health of clients. The facility must have these policies and procedures reviewed annually by a licensed physician who is familiar with the symptoms of withdrawal from alcohol and drug abuse. (d) Must ensure that the observation of a client	D 103		

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D 103	<p>Continued From page 8</p> <p>during his treatment in the social model detoxification program is reflected in the records of the client as deemed necessary by the policies and procedures of that facility.</p> <p>2. The staff of a facility that offers a social model detoxification program must complete at least 6 hours of additional education in the detoxification of alcohol and drug abusers, as approved by the program of ongoing quality improvement pursuant to NAC 449.1218, every 2 years. Such education must include instruction in:</p> <p>(a) Acute withdrawal symptoms from alcohol and drug abuse; and</p> <p>(b) First-aid procedures for clients with seizures.</p> <p>This Regulation is not met as evidenced by: Surveyor: 21044 Based on record review and interviews from 10/22/09 to 10/28/09, the facility was admitting clients undergoing detoxification from alcohol and drug abuse.</p> <p>Findings include:</p> <p>During interviews, it was discovered the facility was admitting clients undergoing detoxification from alcohol and drug abuse without being certified by the Substance Abuse Prevention and Treatment Agency (SAPTA) or having a formal program to provide detoxification services. Prior to being admitted, clients were seen by an outside physician who prescribed "detox meds" and then were admitted "to detox." Staff also reported that no one took vital signs on the detoxing clients unless the clients complained of feeling dizzy or being unwell.</p>	D 103		

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D 103	Continued From page 9	D 103		
	Severity: 2 Scope: 3			
D 132 SS=F	<p>NAC 449.129(3) Construction Standards</p> <p>3. Facilities housing 17 or more clients must meet the requirements of the chapter entitled " New Hotels and Dormitories, " of the edition of NFPA 101: Life Safety Code, adopted by reference pursuant to NAC 449.0105. Those facilities housing not more than 16 clients must meet the requirements of the chapter entitled " Lodging or Rooming Houses, " of the edition of NFPA 101: Life Safety Code, adopted by reference pursuant to NAC 449.0105.</p> <p>This Regulation is not met as evidenced by: Surveyor: 21044 National Fire Protection Association (NFPA) Life Safety Code 101</p> <p>Chapter 26 Lodging or Rooming Houses</p> <p>26.3.4.5 Smoke Alarms</p> <p>26.3.4.5.3 Existing battery-powered smoke alarms, rather than house electric-powered smoke alarms, shall be permitted where the facility has demonstrated to the authority having jurisdiction that the testing, maintenance, and battery replacement programs will ensure reliability of power to the smoke alarms.</p> <p>Based on record review and interview on</p>	D 132		

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D 132	Continued From page 10  10/22/09, the facility did not ensure that smoke detector testing was documented for the past 11 of 12 months (From November 2008 to September 2009).  Severity: 2 Scope: 3	D 132		
D 160 SS=B	NAC 449.135(1) Safety from fire  1. Portable fire extinguishers must be installed throughout each facility at the direction of the fire authority having jurisdiction. Each portable fire extinguisher available at a facility must be inspected, recharged and tagged at least once each year by a person certified by the State Fire Marshal to conduct such inspections.  This Regulation is not met as evidenced by: Surveyor: 28276 Based on observation on 10/22/09, the facility failed to ensure that 1 of 4 fire extinguishers was annually inspected (laundry room).  Severity: 1 Scope: 2	D 160		
D 168 SS=F	NAC 449.135(6) Safety from fire  6. A facility must conduct fire drills at least monthly and a written record of each drill conducted must be retained in the facility for not less than 12 months after the drill is conducted.  This Regulation is not met as evidenced by: Surveyor: 28276	D 168		

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D 168	Continued From page 11  Based on record review on 10/22/09, the facility failed to ensure that fire drills were conducted monthly during the past 11 of 12 months (From November 2008 to September 2009).  Severity: 2 Scope: 3	D 168		
D 215 SS=F	NAC 449.141(7) Health Services  7. There must be one staff person in the facility who is capable of providing cardiopulmonary resuscitation at all times. Staff members providing cardiopulmonary resuscitation must be qualified by the American Red Cross or another recognized agency.  This Regulation is not met as evidenced by: Surveyor: 28276 Based on record review on 10/22/09, the facility failed to ensure 4 of 4 house managers had evidence of cardiopulmonary resuscitation training (CPR) (Employee #3, #8, #10 and #11).  Severity: 2 Scope: 3	D 215		
D 216 SS=F	NAC 449.141(8) Health Services  8. Clients of residential programs must undergo a tuberculin skin test that meets the requirements specified in chapter 441A of NAC.  This Regulation is not met as evidenced by: Surveyor: 28276 NAC 441A.380 Admission of persons to certain medical facilities, facilities for the dependent or homes for individual residential care: Testing;	D 216		

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D 216	Continued From page 12  respiratory isolation; medical treatment; counseling and preventive treatment; documentation. (NRS 441A.120). 1. Except as otherwise provided in this section, before admitting a person to a medical facility for extended care, skilled nursing or intermediate care, the staff of the facility shall ensure that a chest radiograph of the person has been taken within 30 days preceding admission to the facility. 2. Except as otherwise provided in this section, the staff of a facility for the dependent, a home for individual residential care or a medical facility for extended care, skilled nursing or intermediate care shall: (a) Before admitting a person to the facility or home, determine if the person: (1) Has had a cough for more than 3 weeks; (2) Has a cough which is productive; (3) Has blood in his sputum; (4) Has a fever which is not associated with a cold, flu or other apparent illness; (5) Is experiencing night sweats; (6) Is experiencing unexplained weight loss; or (7) Has been in close contact with a person who has active tuberculosis. (b) Within 24 hours after a person, including a person with a history of bacillus Calmette-Guerin (BCG) vaccination, is admitted to the facility or home, ensure that the person has a tuberculosis screening test, unless there is not a person qualified to administer the test in the facility or home when the patient is admitted. If there is not a person qualified to administer the test in the facility or home when the person is admitted, the staff of the facility or home shall ensure that the test is performed within 24 hours after a qualified person arrives at the facility or home or within 5 days after the patient is admitted, whichever is sooner. (c) If the person has only completed the first step	D 216		

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Bureau of Health Care Quality & Compliance

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>NVS4492ADA</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED  <b>10/28/2009</b>
NAME OF PROVIDER OR SUPPLIER  <b>SOLUTIONS RECOVERY INC</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>2975 TENAYA LAS VEGAS, NV 89117</b>		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
D 216	<p>Continued From page 13</p> <p>of a two-step Mantoux tuberculin skin test within the 12 months preceding admission, ensure that the person has a second two-step Mantoux tuberculin skin test or other single-step tuberculosis screening test. After a person has had an initial tuberculosis screening test, the facility or home shall ensure that the person has a single tuberculosis screening test annually thereafter, unless the medical director or his designee or another licensed physician determines that the risk of exposure is appropriate for a lesser frequency of testing and documents that determination. The risk of exposure and corresponding frequency of examination must be determined by following the guidelines as adopted by reference in paragraph (h) of subsection 1 of NAC 441A.200.</p> <p>3. A person with a documented history of a positive tuberculosis screening test is exempt from skin testing and routine annual chest radiographs, but the staff of the facility or home shall ensure that the person is evaluated at least annually for the presence or absence of symptoms of tuberculosis.</p> <p>4. If the staff of the facility or home determines that a person has had a cough for more than 3 weeks and that he has one or more of the other symptoms described in paragraph (a) of subsection 2, the person may be admitted to the facility or home if the staff keeps the person in respiratory isolation in accordance with the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (h) of subsection 1 of NAC 441A.200 until a health care provider determines whether the person has active tuberculosis. If the staff is not able to keep the person in respiratory isolation, the staff shall not admit the person until a health care provider determines that the person does not have active tuberculosis.</p>	D 216		

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D 216	<p>Continued From page 14</p> <p>5. If a test or evaluation indicates that a person has suspected or active tuberculosis, the staff of the facility or home shall not admit the person to the facility or home or, if he has already been admitted, shall not allow the person to remain in the facility or home, unless the facility or home keeps the person in respiratory isolation. The person must be kept in respiratory isolation until a health care provider determines that the person does not have active tuberculosis or certifies that, although the person has active tuberculosis, he is no longer infectious. A health care provider shall not certify that a person with active tuberculosis is not infectious unless the health care provider has obtained not less than three consecutive negative sputum AFB smears which were collected on separate days.</p> <p>6. If a test indicates that a person who has been or will be admitted to a facility or home has active tuberculosis, the staff of the facility or home shall ensure that the person is treated for the disease in accordance with the recommendations of the Centers for Disease Control and Prevention for the counseling of, and effective treatment for, a person having active tuberculosis. The recommendations are set forth in the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (g) of subsection 1 of NAC 441A.200. The staff of the facility or home shall ensure that counseling and preventive treatment are offered to each person with a positive tuberculosis screening test in accordance with the guidelines of the Centers for Disease Control and Prevention as adopted by reference in paragraph (h) of subsection 1 of NAC 441A.200.</p> <p>8. The staff of the facility or home shall ensure that any action carried out pursuant to this section and the results thereof are documented in the person ' s medical record.</p>	D 216			

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D 216	Continued From page 15  (Added to NAC by Bd. of Health, eff. 1-24-92; A 3-28-96; R084-06, 7-14-2006)  Based on record review on 10/22/09, the facility did not ensure that 1 of 4 residents (Resident #2) met the requirements of NAC 441A.380 concerning tuberculosis (TB).  Findings include:  Resident #1 - The resident's file did not contain evidence of any TB skin testing. The facility provided a print out from Quest dated 10/22/09 that documented the results of the two step tuberculosis test was pending. Severity: 2 Scope: 3	D 216		
D 236 SS=D	NAC449.144(5) Medication  5. All medication must be maintained in locked storage. Controlled substances must be maintained in a locked box within the locked storage. Medications requiring refrigeration must be kept in a locked box inside the refrigerator separated from food and other items. Disinfectants and medication for external use must be stored separately from medications for internal use and from medications that can be injected. All potent, poisonous or caustic drugs must be plainly labeled, stored and made accessible only to authorized persons. All medication storage must be maintained in accordance with the security requirements of federal, state and local laws.  This Regulation is not met as evidenced by: Surveyor: 28276 Based on observation and interview on 10/22/09, the facility failed to ensure all medication was	D 236		

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D 236	Continued From page 16  maintained in a locked storage. A box of expired antacid packets was found unlocked in the first aid kit.  Severity: 2 Scope: 1	D 236			
D 253 SS=C	NAC 449.147(9) Dietary Services  9. A qualified person must be used as a consultant on planning meals and serving food. Consultation each month is required. A qualified person may be a person meeting the requirements for registration with the Commission on Dietetic Registration as either a registered dietitian or a registered dietetic technician.  This Regulation is not met as evidenced by: Surveyor: 28276 Based on interviews on 10/22/09, the facility did not have a contract with a dietician for the planning of meals and serving of food.  Severity: 2 Scope: 3	D 253			

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